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PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09930907

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			19					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			/ (6 minus 20=		• Ø			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			5 minus 3 =		2			X40=		OR	X80=	160
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	ļ	TOTAL		OR	TOTAL	870
CLAIMS AS AMENDED - PART II										•	OTHER THAN	
		(Column 1) CLAIMS		(Colui		(Column 3)	<u>.</u>	SMALL		OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI	IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T 01 4114	=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF MI	ULTIPLE DEF	ENDEN	I CLAIM		J	+135=		OR	+270=	
							ı	TOTAL ADDIT. FEE			TOTAL ADDIT, FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)		ADDII. PEE			ADDIT. FEET	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	T CL AIM	<u> -</u>	4	X40=		OR	X80=	
	111101111202	THATION OF IM	OLIN CL DEI	LNDLIN	T OLY (IIV)		_	+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			mn 2)	(Column 3)	_					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	•	=	╽╽	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	, TOLAIL	=	.	X40=		OR	X80=	
Ľ	HIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	I CLAIM	,	J	+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Num							und in the ann	ronriate ho	in co	lumn 1	